

BEST AVAILABLE COPY

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-family: cursive;">10655206</div>		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1							51				
2	<i>cancel</i>						52				
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